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<b>Attention:</b> Group Art Unit: 1745	<b>From:</b> Travis Dodd
<b>Fax:</b> 571-273-8300	<b>Fax:</b> 818-833-2065
<b>Phone:</b>	<b>Phone:</b> 818-833-2014
<b>Company:</b> U.S. Patent and Trademark Office	<b>Company:</b> Quallion LLC
	<b>Pages:</b> Total of (16) Pages
<b>Re:</b> Application Serial No.: 10/810,019 Title: POLYSILOXANE FOR USE IN ELECTROCHEMICAL CELLS Filed: March 25, 2004 Examiner: Jonathan Crepeau Group Art Unit: 1745 Attorney Docket No.: Q198-US1	<b>Date:</b> November 1, 2007

☐ Urgent ☒ For Review ☐ Please Comment ☒ Please Reply ☐ Please Recycle

If you have any questions or did not receive this transmission in its entirety, please call (818) 833-2000, extension 2014.

## CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

I hereby certify that the following documents are being facsimile transmitted to the United States Patent and Trademark Office, Fax No. 571-273-8300 on November 1, 2007:

Amendment Transmittal Letter (2 pages)  
Fee Transmittal (in duplicate) (2 pages)  
Response to Non-Compliant Amendment (11 pages)

Lisa K. Robbins  
(Name of Person Signing Certificate)

  
(Signature)

**Quallion LLC**

PO Box 923127, Sylmar, CA 91392-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065

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PAGE 1/16 \* RCVD AT 11/1/2007 6:55:20 PM [Eastern Daylight Time] \* SVR:USPTO-EFAX-3/22 \* DNIS:2738300 \* CSID:8188332065 \* DURATION (mm-ss):04-08

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	10/810,019
	<b>Filing Date</b>	March 25, 2004
	<b>First Named Inventor</b>	WEST, Robert C. et al.
	<b>Group Art Unit</b>	1745
	<b>Examiner Name</b>	Jonathan Crepeau
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b> Q198-US1

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Authorized  <input checked="" type="checkbox"/> Non-Compliant Amendment  After Final  Affidavits/declaration(s) with Exhibits  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application  Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers <i>(for an Application)</i>  Drawing(s)  Licensing-related Papers  Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address  Terminal Disclaimer  Request for Refund  CD, Number of CD(s) _____	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) <i>(please identify below):</i> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Remarks _____		

Customer Number or Bar Code Label

31815

(insert Customer No. or Attach bar code label here)

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Dated: 11/1/2007

 Phone: (818) 833-2003  
 Fax: (818) 833-2065

By: \_\_\_\_\_


 Travis Dodd  
 Attorneys for Applicant(s)  
 P.O. Box 923127  
 Sylmar, CA 91392-3127

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail In an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this _____ date: _____			
Typed or printed name	TRAVIS DODD		
Signature		Date	

NOV 01 2007

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	10/810,019
		Filing Date	March 25, 2004
		First Named Inventor	WEST, Robert C. et al.
		Group Art Unit	1745
		Examiner Name	Jonathan Crepeau
Total Number of Pages in This Submission		Attorney Docket Number	Q198-US1

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Authorized <input checked="" type="checkbox"/> Non-Compliant Amendment After Final Affidavits/declaration(s) with Exhibits Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers (for an Application) Drawing(s) Licensing-related Papers Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) _____	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Remarks		

Customer Number or Bar Code Label	31815 (insert Customer No. or Attach bar code label here)
The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.	
Respectfully submitted,	
Dated: 11/1/2007 Phone: (818) 833-2003 Fax: (818) 833-2065	By:  Travis Dodd Attorneys for Applicant(s) P.O. Box 923127 Sylmar, CA 91392-3127

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date: _____			
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## FEE TRANSMITTAL

Attorney Docket No.	Q198-US1
First Named Inventor:	West, Robert C. et al.
Application Number	10/810.019
Filing Date:	March 25, 2004
Examiner Name:	1745
Group/Art Unit:	Jonathan Crepeau

<b>TOTAL AMOUNT OF PAYMENT:</b>	<b>\$ 0.00</b>
<b>METHOD OF PAYMENT (check One)</b>	<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:</p> <p>Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC</p> <p><input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other - Credit Card</p>

## 2. UTILITY Basic Filing Fee &amp; Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$310.00	\$155.00	\$0.00
Total Claims	24 - 54 =	0	X \$50.00	X \$25.00	\$0.00
Independent Claims	2 - 4 =	0	X \$210.00	X \$105.00	\$0.00
Multiple Dependent Claim(s) (if applicable)			\$370.00	\$185.00	\$0.00
Total of above Calculations =					\$0.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 210.00	\$ 105.00	\$0.00
Reissue filing fee	\$ 310.00	\$ 155.00	\$0.00
Provisional filing fee	\$ 210.00	\$ 105.00	\$0.00
Total of above Calculations =			\$0.00

## 3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	11/1/2007

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## FEE TRANSMITTAL

Attorney Docket No.	Q198-US1
First Named Inventor:	West, Robert C. et al.
Application Number	10/810,019
Filing Date:	March 25, 2004
Examiner Name:	1745
Group/Art Unit:	Jonathan Crepeau

<b>TOTAL AMOUNT OF PAYMENT:</b>	<b>\$ 0.00</b>
<b>METHOD OF PAYMENT (check One)</b>	<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:</p> <p>Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC</p> <p><input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other — Credit Card</p>

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## 3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	11/1/2007

Application No: 10/810,019 Docket No.: Q198-US1

Page 1

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICEIn Re Application of:  
WEST, Robert C. et al.

Examiner: CREPEAU, Jonathan

Serial No.: 10/810,019

Filed: March 25, 2004

Art Unit: 1745

Title: POLYSILOXANE FOR USE IN  
ELECTROCHEMICAL CELLSMail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450RESPONSE TO OCTOBER 22, 2007  
NOTICE OF NON-COMPLIANT AMENDMENT (37 CFR 1.121)

In response to the Notice of Non-Compliant Amendment of October 22, 2007, please enter the following resubmitted "In The Specification" section which begins on page 2 of this response. The "Remarks" section has also been corrected to reflect the resubmitted "In The Specification." Accordingly, please enter the following resubmitted "Remarks" section which begins on page 8 of this response.

Respectfully submitted,

TRAVIS DODD  
Reg. No. 42,491  
Attorney for Applicant(s)Quallion LLC  
P.O. Box 923127  
Sylmar, CA 91392-3127  
818-833-2003 ph  
818-833-2065 fax